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|  | Individualized Program Plan 2012-2013 |

For help with the IPP form, [click here](http://inside.psd70.ab.ca/Docs/FormLibrary/IPP%20Essential%20Information.docx)

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| **Last Name:** | **First Name:** |
| Click to enter text | Click to enter text |

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| --- | --- | --- |
| **Date of Birth:** | **Alberta Learning ID #:** | **Special Needs Code** |
| Enter date | Click to enter text. | Click to enter text. |

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| **School:** | **Grade:** | **Date of IPP:** |
| Click to enter text. | Click to enter text. | Enter date |

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| IPP Team | |
| Teacher and IPP Coordinator: | Click to enter text. |
| Parents/Guardians: | Click to enter text. |
| Others: | Click to enter text. |

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| Parent Input |
| Click to enter text. |

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| Student Profile | | |
| **Specialist Assessments** | | |
| Date | Test & Professional Administering | Assessment/Diagnostic Information |

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| Enter date |  |  |
| Enter date |  |  |
| Enter date |  |  |

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| **Relevant Medical Information:** | |
| Click to enter text. | |
|  | **Medication:** |
|  | Click to enter text. |
| **Current Level of Functioning:** | |
| Click to enter text. | |
| **Strengths:** | |
| Click to enter text. | |
| **Needs:** | |
| Click to enter text. | |

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| Context |
| **School/Classroom Context:** |
| Click to enter text. |
| **Support Services Provided:** |
| Click to enter text. |
| **General Program Strategies and Accommodations:** |
| Click to enter text. |

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| Long Term Goal #1 | | |
| **Overall Goal:** |  | |
| Click to enter text. | | |
| Objective/Learning Outcomes | | Review |

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| **Assessment Procedures:** |
| Click to enter text. |
| **Strategies:** |
| Click to enter text. |

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| Long Term Goal #2 | | |
| **Overall Goal:** |  | |
| Click to enter text. | | |
| Objective/Learning Outcomes | | Review |

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| **Assessment Procedures:** |
| Click to enter text. |
| **Strategies:** |
| Click here to enter text. |

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| Long Term Goal #3 | | |
| **Overall Goal:** |  | |
| Click to enter text. | | |
| Objective/Learning Outcomes | | Review |

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| **Assessment Procedures:** |
| Click here to enter text. |
| **Strategies:** |
| Click to enter text. |

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| Long Term Goal #4 | | |
| **Overall Goal:** |  | |
| Click to enter text. | | |
| Objective/Learning Outcomes | | Review |

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| **Assessment Procedures:** |
| Click to enter text. |
| **Strategies:** |
| Click to enter text. |

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| Ongoing Transition Planning | |
| Date | Comment |

|  |  |
| --- | --- |
| Enter date |  |
| Enter date |  |
| Enter date |  |

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| PAT/ DIP Accommodations | | | |
| **Grade/Program** | | **Accommodations Provided on an Ongoing Basis** | **IPP/RPA in Place?** |
| Click to enter text. | | Yes  No | Yes No |
| **Which Tests?** | | **Special Provisions Requested:** | |
|  | Language Arts | Click to enter text. | |
|  | Mathematics |
|  | Social Studies |
|  | Science |
| **Evidence:** | | | |
| Click to enter text. | | | |
| **Rationale:** | | | |
| Click to enter text. | | | |

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| Year End Review |
| **Achievements:** |
| Click to enter text. |
| **Strategies that Worked Well:** |
| Click to enter text. |
| **Areas for Continuing Growth:** |
| Click to enter text. |
| **Recommended Support Services:** |
| Click to enter text. |
| **Placement for Next Year:** |
| Click to enter text. |

Signature Page

Individualized Program Plan 2012-2013 for First name Last name:

I understand and agree with the information contained in this IPP.

*As per section 123(2)(a) of the* [*School Act*](http://www.qp.alberta.ca/documents/Acts/s03.pdf)*, parents have the right to appeal decisions made in regard to student programs which significantly affect the education of a student, and may within a reasonable time from the date that the parent or student was informed of the decision appeal that decision to the board.*

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|  | Initial Review  Date: | Review  Date: | Review    Date: |
| Teacher’s Signature |  |  |  |
| Parent/Guardian’s  Signature\* |  |  |  |
| Student’s Signature  (if appropriate) |  |  |  |
| Principal’s Signature |  |  |  |
| Others involved |  |  |  |

Parent/Guardian IPP input form sent home on Enter date and returned on Enter date

\*Note: If unsuccessful in obtaining parent/guardian signature, please note when contact was attempted.

Click to enter text.